



Out of County Business Registration Application

A. BUSINESS INFORMATION

All blanks must be filled. If not applicable, please use NA.

Type of Application: Previous Registration Number:

Business Name:

Business Mailing Address: City: Zip Code:

Business Phone: Business Fax:

Business Location: City: Zip Code:

Business Type and Activities:

State Board License (complete the two boxes below, if applicable):

License Number: Expiration:

Business Owner:

Signature of Owner: _____ Date: _____

B. REQUIRED DOCUMENTS

Applications submitted without the required document copies listed below will not be processed. Information requested on this application is required by the Forsyth County Occupational Tax Ordinance to provide for regulatory activities under O.C.G.A. § 48-13-9.

- Current business license from the jurisdiction where the business is located
- State board license, if applicable
- Sign companies must also provide a certificate of liability insurance

FOR STAFF USE ONLY
BUSINESS LICENSE NUMBER: